



12-14-05

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

32641 7590 09/13/2005

DIGEO, INC C/O STOEL RIVES LLP
201 SOUTH MAIN STREET, SUITE 1100
ONE UTAH CENTER
SALT LAKE CITY, UT 84111

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/955,569	09/17/2001	Mark Peting	50588/343	1164

TITLE OF INVENTION: APPARATUS AND METHOD FOR CORRECTING SIGNAL IMBALANCES USING COMPLEX MULTIPLICATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/13/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGO, CHUONG D	2193	708-300000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kory D. Christensen
2 STOEL RIVES LLP
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. 12/15/2005 MAHMED2 00000057 09955569

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

1400.00 OP

Digeo, Inc.

01 FC:1501
02 FC:1504
03 FC:8001

300.00 OP
15.00 OP

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502375 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name Kory D. Christensen

Date December 13, 2005

43,548

Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)

Applicant(s): Mark Peting et al.

DEC 13 2005

Docket No.

50588/343

Application No.
09/955,569Filing Date
September 17, 2001Examiner
Chuong D. NgoCustomer No.
32641Group Art Unit
2193

Invention: APPARATUS AND METHOD FOR CORRECTING SIGNAL IMBALANCES USING COMPLEX MULTIPLICATION

I hereby certify that the following correspondence:

Transmittal of Payment of Issue Fee (1 pg.); PTOL-85 Part B - Fee(s) Transmittal Form (1 pg.); PTO-2038 Credit Card Payment Form in the amount of \$1715.00 (1 pg.); Postcard.*(Identify type of correspondence)*

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

December 13, 2005*(Date)***Mary A. Hancock***(Typed or Printed Name of Person Mailing Correspondence)**(Signature of Person Mailing Correspondence)*EV 699361009 US*("Express Mail" Mailing Label Number)*

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)
(37 C.F.R. 1.311)

Docket No.

50588/343

Applicant(s): Mark Petting et al.

DEC 13 2005

Application No. 09/955,569	Filing Date September 17, 2001	Examiner Chuong D. Ngo	Customer No. 32641	Group Art Unit 2193	Confirmation No. 1164
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Invention: **APPARATUS AND METHOD FOR CORRECTING SIGNAL IMBALANCES USING COMPLEX MULTIPLICATION**

Mail Stop Issue Fee
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Transmitted herewith are the following for the above-identified application.

- Issue Fee Transmittal Form PTOL-85
- Utility Fee: \$ 1400.00 Design Fee: _____ Plant Fee: _____
- Publication Fee: \$ 300.00
- A check in the amount of _____ is attached.
- The Director is hereby authorized to charge and credit Deposit Account No. **502375** as described below.
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 - Charge any additional fee required.
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Signature

Dated: December 13, 2005

Kory D. Christensen
 Pat. Reg. No. 43,548
 STOEL RIVES LLP
 One Utah Center
 201 South Main Street, Suite 1100
 Salt Lake City, Utah 84111
 Telephone: 801.578.6993
 Facsimile: 801.578.6999

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